

CLAIMS ONLY

Application Number

Filing Date

10/001511

Applican(s)

CLAIMS	AS FILED 4125706		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments						
	Indep	Depend	Indep	Depend	Indep	Depend	*		*		*		
1	/						51	/	/	Indep	Depend	Indep	Depe
2		/					52	/	/				
3		/					53		/				
4	/	/					54		/				
5	/	/					55		/				
6	/	/					56		/				
7		/					57		/				
8		/					58	/	/				
9		/					59	/	/				
10		/					60	/	/				
11		/					61	/	/				
12		/					62	/	/				
13		/					63	/	/				
14		/					64	/	/				
15		/					65	/	/				
16		/					66	/	/				
17		/					67	/	/				
18		/					68	/	/				
19		/					69	/	/				
20		/					70	/	/				
21		/					71	/	/				
22		/					72	/	/				
23		/					73	/	/				
24		/					74	/	/				
25		/					75	/	/				
26		/					76	/	/				
27	/						77	/	/				
28		/					78	/	/				
29		/					79	/	/				
30	/	/					80						
31	/	/					81						
32	/	/					82						
33	/	/					83						
34	/	/					84						
35	/	/					85						
36	/	/					86						
37	/	/					87						
38	/	/					88						
39	/	/					89						
40	/	/					90						
41	/	/					91						
42	/	/					92						
43	/	/					93						
44	/	/					94						
45	/	/					95						
46	/	/					96						
47	/	/					97						
48	/	/					98						
49	/	/					99						
50	/	/					100						
Total							Total						
Indep							Indep	4					
Depend							Depend	60					
Total							Total	64					
Claims							Claims						